

### NJPA Talking points for Telehealth for Legislators:

1. **We recommend that expansions in telehealth policies enacted in response to the COVID-19 public health emergency remain in place for at least twelve months and/or until a vaccine is deemed effective and made available to the public.**
2. **We urge you to allow for the expansive use of telehealth (emergency waiver) until there is a resolution to the COVID-19 public emergency.**
3. **We ask that New Jersey extend the temporary emergency waiver for at least 12 months and/ or until a vaccine is deemed effective and made available to the public, after the President and HHS Secretary end the COVID-19 public health emergency.**
  - a. Risks could be greatly minimized by letting psychologists and other mental health providers continue to deliver effective services through telehealth, which is an important public health consideration. There are many individuals in need of mental and behavioral health services with conditions and disorders that prevent them from safely (or without great anxiety) leaving their homes and sharing close personal space with other people. This will be especially burdensome on moderate- and low-income patients who have no choice but to take public transportation or rely on others to get to their health care appointments.
  - b. CMS allowed for reimbursement of mental and behavioral health services delivered by phone on Thursday April 30<sup>th</sup>. This only further demonstrates the need to increase access to these services now more than ever.
4. **We ask that New Jersey follow the actions taken by CMS regarding phone-only services and mandate that Medicaid and commercial health plans reimburse for phone-only services for routine traditional mental and behavioral health services.**
  - a. We urge New Jersey to support continuity of care by directing insurers in our state to allow their insureds and providers to continue utilizing telehealth (i.e. videoconferencing) services as they have during the current COVID-19 public health emergency.
5. **We ask for the continued expansion of current mental health coverage for in and out of network mental health providers.** NJPA will stress that this expansion should include the following until a Coronavirus vaccine is deemed effective and made available to the public:
  - The continued rates of financial reimbursement for telehealth as for in-person treatment,
  - The continued flexibility of telehealth platforms (as long as they are HIPAA compliant), including audio-only platforms, that are now being relaxed to in and out of network providers.
  - Consistency of the above recommendations across private and public insurance companies
  - Consistency of Codes (Modifiers and Place of Service)

- NJPA suggests directives to ALL private insurance plans for telemedicine/ telehealth services to cover and reimburse using the same codes as in-person services, or for a single modifier code that streamlines the various CPT codes for telemedicine and telehealth services.
6. **To extend the New Jersey Department of Children and Families (DCF) COVID19 government contracted service order to allow contract providers "to use and bill for all available and appropriate technological devices to offer telehealth services."**  
Continuation of telehealth services will continue access for at-risk and underserved children and families, increase service compliance and reduce service related costs for the state of New Jersey.
  7. **Require ALL insurers, including self-insured plans, to continue to follow the relaxed rules for telemedicine by:**
    - removing a registration requirement for telemedicine from ALL companies,
    - removing requirements for professionals to use the Insurance's own platform and to accept ANY HIPAA compliant platform, including audio-only platforms,
    - **reimbursing treatments in the same manner for in and for out of network psychologists providing telemedicine;**
  8. **Equity for Marginalized Groups:** We propose directives ensuring continuing internet access to families in need during the continuation of this crisis. Public policies to manage the current public health crisis are appreciated, but their impacts on historically marginalized or vulnerable groups are not well known. There is a need for comprehensive measurement of the impact of policies during the current public health crisis on these citizens, including persons of color and youth.
    - We suggest that the impact of stressors caused by COVID19 crisis, as well as the resulting related policies and laws, be measured on marginalized and powerless groups.
  9. **NJPA would like to collaborate with the state and local health care authorities to evaluate which changes made during the COVID-19 public health emergency should remain after the emergency ends.**